



Connecticut Dietetic Association

"Serving the public through the promotion of optimal nutrition and well-being"

www.eatrightct.org

BOARD OF DIRECTORS 2006-2007

Robin Abourizk, MA, MS, RD
President

Teresa Martin Dotson, RD, CD-N
President-Elect

Sharon Mierzwa, RD, MPH, LMT
Past President

Charlotte Meucci, RD, CD-N
CPI Chair

Paula Leibovitz, MS, RD, CDE, CD-N
Delegate

Rebecca Sullivan, MS, RD
Member-at-Large

Ellen Liskov, RD, MPH, CDE, CD-N
Secretary

Randi Y. O'Brien, MS, RD, CD-N
Treasurer

CDA Testimony Re: Bill 258 – Public Health Committee, 2-26-07

Good day Senator Handley, Representative Sayers and members of the Public Health Committee. I am Sharon Mierzwa, past president of the Connecticut Dietetic Association, current chairperson of their Public Policy & Legislative Committee, and past president of the Connecticut Nutrition Council. I am here to speak in opposition to Senate Bill 258 – An Act Prohibiting the Use of Trans Fat in Connecticut Food Service Establishments.

The Connecticut Dietetic Association wholeheartedly endorses the spirit and intent of this bill, which we interpret as an effort to safeguard and protect the health and nutrition of CT residents. However, if the purpose is to improve the quality of food sold in Connecticut, we believe it would fail in that quest.

On January 1, 2006, the U.S. Food & Drug Administration (FDA) instituted a requirement that the trans fat content of foods be listed on food labels. Trans fat in some food products is now being replaced with saturated fat so that products can carry the label claim of "Zero trans fat". This replacement may provide tasty products to consumers, but negates some of the health improvements associated with decreased trans fat consumption. In other words, we are substituting one evil for another. The consumption of **saturated fat** is now more excessive than intake of trans fat and cholesterol. Scientific evidence indicates that it is **most important for us to decrease our intake of saturated fat** to decrease our risk of coronary heart disease. By removing trans fatty acids and substituting saturated fatty acids in their place, we have not done the public any favors. Both types of fats are equally dangerous to our heart and blood vessels. The bad news: through federal efforts to identify and minimize trans fat content in foods, we are now faced with an increased saturated fat content in many food products. The good news: food manufacturers are voluntarily moving toward minimizing trans fats in their products. There is every reason to expect manufacturers to continue this trend, so that within the next several years, there will be minimal trans fatty acids in our food supply.

There are other fatty acids besides trans fats that are detrimental to cardiovascular health. Tropical oils such as coconut, palm, and palm kernel oil, or lauric acid and myristic acid naturally occurring in chicken, beef, and pork can elevate total cholesterol levels. When we focus on only one food component in our eating pattern or food policies without taking into consideration the broader context, we veer away from the goal to promote healthy eating and decreased disease risk. Focusing exclusively and narrowly on trans fats is not going to accomplish improvement in the quality of foods served in CT.

If we consider the strongest scientific nutrition recommendations based on evidence from clinical and epidemiological studies, the American Heart Association Nutrition Committee recently released the Diet and Lifestyle Recommendations for the prevention

American Diabetes Association, and the Dietary Guidelines for Americans created in 2005. To translate these to everyday terms, a 10% reduction in serum cholesterol is associated with a 15% reduction in cardiovascular heart disease events. The National Cholesterol Education Program Expert Panel Report states that the most cost effective approach to prevention of coronary heart disease (CHD) is a series of public health interventions: diet modification, exercise, and weight control combined with smoking avoidance and cessation. These approaches are safe, incur few direct costs, and offer benefits beyond CHD reduction.

Let's face it, consumers are confused by competing and contradictory nutrition facts compounded by media distortion. Connecticut's population can benefit from the provision of comprehensive nutrition education that addresses portion sizes, food preparation, and food choices. If our intent is to encourage healthier food availability, preparation, and choices, we can accomplish that through more effective methods than instituting regulations. When New York City asked 20,000 restaurants and 14,000 food suppliers to eliminate partially hydrogenated oils and food products from their kitchens, the effort was educational, not solely regulatory. Their action was built on a collaborative partnership involving the City Health Department, the New York State Restaurant Association, and the American Heart Association. They provided educational materials to restaurants, food suppliers, and supermarkets to alert them to the identification of trans fat, its dangers, and how to replace it with healthier options.

We have no such plan for implementation in Connecticut. Instead, Bill #258 raises fundamental questions such as:

- How would a ban on trans fats be monitored and enforced?
- Would it become another unfunded mandate for an already over-burdened and under-funded local health departments and districts?
- Since food manufacturers are already voluntarily removing trans fatty acids from frying oils, it makes little sense to place additional burdens on an already strained inspection system.

As a constructive alternative, we would prefer to see the legislature consider providing more support for public health and nutrition education efforts at the local community level. There is currently no State-funding to promote healthy eating and active living programs for the prevention and reduction of chronic diseases in CT. Many food service establishments, health departments, and community organizations are ready to pro-actively support healthy lifestyle choices. If we truly wish to make a substantial difference in the health and well-being of people in Connecticut, let's work together in partnership to comprehensively support those efforts through public health funding and programs, not additional regulations. Thank you for this opportunity to speak with you today.